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TRANSMITTAL FORM			Application Number			action of information unless it displays a valid OMB control number. 10/709,899					
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			First Named Inventor			Ryan I, GOOSEN					
			Art Unit			3737					
(to be used for all correspondence after initial filing)				Examiner Name Parikha Solani				lanki Mel	hta		
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ENCLOSURES (Check all that apply)											
Fee Trans	Fee Transmittal Form			Drawing(s)					After Allowance Communication to TC		
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Affidavits/declaration(s)			ᄖ	Change of Correspondence A Terminal Disclaimer			Address	片	Status	Letter Enclosure(s) (please identify	
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under 37 CFR 1.52 or 1.53 2.			2. Copy	py of USPTO Notice of Recordation listing the above-identified application						tified application	
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